



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT

In re application of:
ETCH

Application No: 09/586,530

Filed: May 31, 2000

For: ETCH ENDPOINT DETECTION

Attorney Docket No.: LAM2P282

Examiner: Song, Matthew J.

Group Art Unit: 1765

Date: February 26, 2004

☐ **Duplicate for
fee processing**

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail to: Commissioner for Patents, Alexandria, VA 22313-1450 on February 26, 2004.

Signed: _____

Sylvia Castillo

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After <u>Amendment</u>		Highest Previously <u>Paid For</u>	Present <u>Extra</u>	<u>SMALL ENTITY</u> <u>RATE FEE</u>	OR	<u>LARGE ENTITY</u> <u>RATE FEE</u>
TOTAL CLAIMS	<u>15</u> -		<u>20</u>	<u>0</u>	X09 = \$	OR	X18 = \$0
INDEP CLAIMS	<u>02</u> -		<u>03</u>	<u>0</u>	X43 = \$	OR	X86 = \$0
[] Multiple Dependent Claim Present and Fee Not Previously Paid					\$145		\$290
TOTAL					\$ _____		\$0

- ☐ Applicant(s) hereby petition for a _____ month(s) extension of time to respond to the outstanding Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0805.
- ☐ Enclosed is our Check No. _____ in the amount of \$ _____ to cover the additional claim fee and/or extension of time fees.
- ☒ If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-0805 (Order No. LAM2P282). A copy of this sheet is enclosed.

Respectfully submitted,
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